PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notifical	ed below or directed oth	or transmitting the ISSU og the Patent, advance of erwise in Block 1, by (a	JE FEE and PUBLICA' rders and notification of a) specifying a new corr	FION FEE (if requi maintenance fees w espondence address;	red). Blocks 1 through 5 s ill be mailed to the current and/or (b) indicating a sep	hould be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
67801 7590 02/03/2011 MARTIN D. MOYNIHAN d/b/a PRTSI, INC. P.O. BOX 16446 ARLINGTON, VA 22215				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
			L			(Depositor's name)	
						(Signature)	
			<u></u>			(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/589,234 05/14/2007		Ofer Ben-Zur		32471	6957		
TITLE OF INVENTION	: DIGITAL PRINTING	APPARATUS					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	PREV. PAID ISSUI	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$755	\$300	\$0	\$1055	05/03/2011	
EXAMINER		ART UNIT	CLASS-SUBCLASS	7			
LIU, KENDRICK X 2861			347-021000				
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignce is identified below, no assignce			or agents OR, alterna (2) the name of a sin registered attorney o 2 registered patent at listed, no name will t	te names of up to 3 registered patent attorneys ents OR, alternatively, e name of a single firm (having as a member a cred attorney or agent) and the names of up to istered patent attorneys or agents. If no name is , no name will be printed. TENT (print or type) I appear on the patent. If an assignce is identified below, the document has been filed for itute for filing an assignment.			
(A) NAME OF ASSI		pletion of this form is NO	(B) RESIDENCE: (CII				
• •	gital Technol	ogies Ltd.	Rosh HaA		,		
Please check the appropr	iate assignee category or	categories (will not be p	rinted on the patent):	Individual 🔊 Co	orporation or other private gr	oup entity Government	
	are submitted: To small entity discount p	permitted)	4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1407 (enclose an extra copy of this form).				
• •	s SMALL ENTITY state	us. See 37 CFR 1.27.	☐ b. Applicant is no le	onger claiming SMA	LL ENTITY status. See 37 (CFR 1.27(g)(2).	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte tes Patent and Trademar	ed from anyone other that k Office.	the applicant; a regi	stered attorney or agent; or	the assignee or other party in	
Authorized Signature	/Jason H.	Rosenblum/	· · · · · · · · · · · · · · · · · · ·	Date	pril 28, 2011		
Typed or printed name		Rosenblum	Λ.	•	No. <u>56,437</u>		
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450. Alexandria	nation is required by 37 C tiality is governed by 35 d application form to the ions for reducing this bu	CFR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will varuden, should be sent to the NOT SEND FEES OR	ion is required to obtain of 1.14. This collection is y depending upon the inche Chief Information Off COMPLETED FORMS.	r retain a benefit by testimated to take 12 dividual case. Any or icer, U.S. Patent and TO THIS ADDRESS	the public which is to file (a minutes to complete, includ omments on the amount of t Trademark Office, U.S. De S. SEND TO: Commissione	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450.	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.